

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|-----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | 10 9-4-01 |
| FORMALITY REVIEW | S.A | 1085 | 9-26-01 |
| RESPONSE FORMALITY REVIEW | SA | JCL039 | 03-19-02 |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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